

FOR INSTRUCTIONS, SEE BACK OF FORM

DISCLOSURE SUMMARY PAGE

Reset Form

FORM DR-2 (Rev. 01/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	57
Indexed	5
Audited	
Computer	4 pages

COMMITTEE NAME (Must be same as on Statement of Organization)

REELECTION of WALLY HOAN COMMITTEE 57

IMPORTANT: Indicate type of committee you are reporting for: 1

(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
(8) Support Slate of Candidates

CANDIDATE COMMITTEES ONLY:

Candidate Name

WALLY HOAN

Political Party

DEM

Office Sought

STATE SENATOR

District (if Senate or House)

Darryl Zuchman
SIGNATURE OF TREASURER (or person filing this report)

319-550-4592
TELEPHONE

06-17-09
DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A JAN 19 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.
(report date) Indicate one 2

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

County & Local Committees, enter County in which Election is held

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

\$ 906.28

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

5975.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

6881.28

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

5324.22

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

\$ 1,557.06

****UNPAID BILLS** (From Schedule D - Attach Schedule D)

0

****IN KIND CONTRIBUTIONS** (From Schedule E - Attach Schedule E)

0

****OUTSTANDING LOANS** (From Schedule F - Attach Schedule F)

0

CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☒ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Reelection of Wally Horn Committee

57

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
01-06-08	ID# CK# 3775	CHICAGO REGIONAL COUNCIL OF CARPENTERS 12 EAST ERIE ST CHICAGO, IL 60611-2796		\$ 500.00	<input type="checkbox"/>
01-06-08	ID# 6078 CK# 1672	IA. PHYSICAL THERAPY PAC 5355 EASTERN AVE DAVENPORT, IA 52807		50.00	<input type="checkbox"/>
01-08-08	ID# CK# 011326	DAVID BONNETT 245 SOUTH BEVERLY DR BEVERLY HILLS, CA 90212		2,000.00	<input type="checkbox"/>
01-10-08	ID# CK# 1034	CLOYD ROBINSON 404 CHERRY HILL Rd. SW CR, IA 52404		150.00	<input type="checkbox"/>
01-18-08	ID# CK# 605	IAAMB PAC 4949 WESTOWN PKWY STE 165 W DES MOINES, IA 50366-6702		100.00	<input type="checkbox"/>
01-18-08	ID# CK# 1062	DAVE PALMER 213 SW FLYNN DR ANKENY, IA 50023		100.00	<input type="checkbox"/>
02-15-08	ID# CK# 1687	BJ TRICKEY PO BOX 1133 CR, IA 52406		500.00	<input type="checkbox"/>
06-29-08	ID# 6070 CK# 3622	IA. LAW PAC 521 E. LOCUST ST 3rd FLR DM. IA. 50309-1939		500.00	<input type="checkbox"/>
06-29-08	ID# CK# 9344	CLOYD ROBINSON 404 CHERRY HILL Rd SW CR, IA 52404		150.00	<input type="checkbox"/>
08-10-08	ID# CK#	PAT GEORGIE 4702 CHESTNUT RIDGE Rd NE CR, IA 52411		200.00	<input type="checkbox"/>
SUB-TOTAL				\$ 4,250.00	
TOTAL (if last page of this schedule)				\$	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Reelection of Wally Horn Committee

57

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
08-20-08	ID# CK#	LANNY WARD 200 CLING DR SW CA, IA 52404		\$ 25.00	<input type="checkbox"/>
08-20-08	ID# 6067 CK# 3891	IA HEALTH PAC 6750 WESTOWN PKWY, STE 100 W. DES MOINES, IA 50266-7726		250.00	<input type="checkbox"/>
08-20-08	ID# CK#	C. JEAN WESTERBECK 206 N. WALNUT ST. NEW LONDON, IA 52645		100.00	<input type="checkbox"/>
08-20-08	ID# CK#	ANDREW WAGG 625 CONCORD LN NW CA, IA 52405-2802		100.00	<input type="checkbox"/>
10-05-08	ID# CK# 1064	IA CHAPTER NAT'L ELECTRICAL CONTRACTORS ASSOCIATION PAC 2900 WESTOWN PKY STE D W. DES MOINES, IA 50266-1315		500.00	<input type="checkbox"/>
10-14-08	ID# 6058 CK# 4390	IA CHIROPRACTIC SOCIETY PAC 1605 N ANKENY BLVD SUITE 100 ANKENY, IA 50023		200.00	<input type="checkbox"/>
10-14-08	ID# CK# 3072	IOWANS FOR A SKILLED WORKFORCE 707 EAST LOCUST ST DM, IA 50309		250.00	<input type="checkbox"/>
11-01-08	ID# CK# 187	RODNEY TOM SHENG 12679 BELLE FLEUR WAY SAN DIEGO, CA 92128		300.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$1,725.00

TOTAL (if last page of this schedule)

\$5,975.00

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization) **ST**
REELECTION of WALLY HORN COMMITTEE

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
01-04-08	ID# CK# 654	WALLY HORN 101 STONEY PT RD SW CR, IA 52404	REIMBURSEMENT FOR TRAVEL AND LODGING TO NCSL MTG IN BOSTON, MA	\$ 990.58
01-11-08	ID# CK# 655	"	REIMBURSEMENT FOR TRAVEL + LODGING TO NCSL MTG IN SANTE FE, NM	456.22
01-11-08	ID# CK# 656	"	REIMBURSEMENT FOR TRAVEL LODGING AND REGISTRATION FOR CSG MTG IN OKLAHOMA CITY	1055.69
01-11-08	ID# CK# 657	JEFFERSON HIGH SCHOOL 1243-20TH ST SW CR, IA 52404	AD IN FOOTBALL PROGRAM	\$25.00
08-24-08	ID# CK# 658	WALLY HORN 101 STONEY PT RD SW CR, IA 52404	REIMBURSEMENT FOR TRAVEL (500 MILES @ .39) TO DCL MTG IN CHICAGO 06-18-08 THRU 06-30-08 (\$199.00)	195.00
	ID# CK# 658	"	REIMBURSEMENT FOR TRAVEL (1453 MILES @ .39) TO RAPID CITY, SD MLC MTG. (\$566.67), REGISTRATION (\$300) LODGING (\$474.50)	1341.47
	ID# CK# 658	"	REIMBURSEMENT FOR TRAVEL (1902 MILES @ .39) TO NEW ORLEANS NCSL MTG., REGISTRATION (\$455) LODGING PKG. (\$38.48) LESS STATE	635.26
10-3-08	ID# CK#	JEFFERSON HIGH SCHOOL 1243-20TH ST SW CR, IA 52404	AD IN FOOTBALL PROGRAM	225.00
SUB-TOTAL				\$
TOTAL (if last page of this schedule)				\$5,324.22

CHECK #658 FOR TOTAL OF \$2171.73

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

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(for Schedule B)